

Rebecca Ann Barnes

Town

County

Died at near Mechanicsville

St. Mary's

MARYLAND

Month		Day	Y.	M.	D.	Native of	Occupation
Aug.		29	65			Maryland	Housewife
Male	White	Married	Widow	Divorced			
Female	Colored	Single	Widow	Number of children living 6			

~~Husband~~ of

Wife of George H. Barnes

Father's Name John Holly

Mother's

Maiden Name

Millicent Curtis

Cause of Death { Primary Typhoid Fever

Death { Immediate

How long sick

3 weeks

Accident, Suicide, Homicide

Reported by Zach. B. Morgan M.D.

Address Mechanicsville Maryland.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

William Thomas Cullins

Town

County

Died at

MARYLAND

Date 1903

Month

Day

Y.

M.

D.

Native of

Occupation

8

30

Age

71

-

-

Md

Farmer

Male

White

~~Married~~~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

Widower

Number of children living

5

Husband
of

Wife

Father's

Mother's

Name

Maiden Name

Cause of

Primary

Tuberculosis

How long sick

about a year

Death

Immediate

Accident, Suicide, Homicide

Reported by

Wm. V. Palmer M. D.

Address

Palmer

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

M. D.



Name In Full

Certificate of Death

Alice Marie Ferrell

Town

County

Died at

Oakley

St. Mary's

MARYLAND

Date 1903

Month

Day

Y.

M.

D.

Native of

Occupation

8

31

Age

-

9

15

md

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Peter H. Ferrell

Mother's

Maiden Name

Jane Alice Wurga

Cause of

Primary

Eczema

Death

Immediate

Amputation

How long sick

2 mos.

Accident, Suicide, Homicide

Reported by

R. H. V. Palmer

Address

Palmer

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

md



Name

in
Full

CERTIFICATE OF DEATH

MARYLAND

TO BE ANSWERED BY
NEAREST FRIENDDied at *John Harris*

Town

Red Gate

County

H. Mary

Date

of death 1903

Month

Aug

Day

24

Years

Age *80*

Months

Days

Sex

*male*Color or
Race*white*Birth-
place*H. Mary, Co*Married, Single
or Widowed

Occupation

*Farmer*Name of Wife or
HusbandFather's
NameFather's
BirthplaceMother's
Maiden NameMother's
BirthplaceName of person giving
in formation*Mrs. Shepard 155*How related
to deceased*Daughter*

CAUSES OF DEATH

Primary

Opium Poisoning

How long

Immediate

by heart

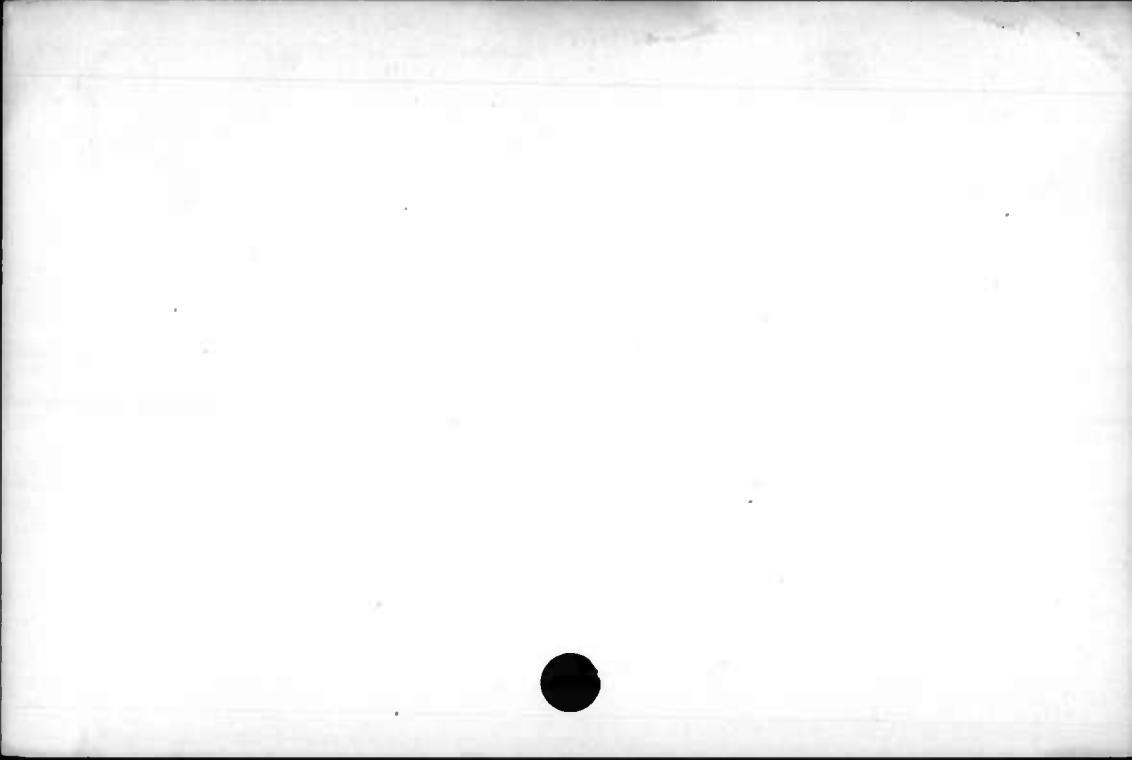
How long

*24 hours*Are the name, age, sex, color, date
and place correctly given above?*yes*Signature of
Physician*Thos. Lynch*

Address

*Lowerdown*PHYSICIAN
OR CORONER

Suicide?



Hannie Jackson Seale

Town

County

Died at *Laurel Grove* *St. Marys*

MARYLAND

Date 19 *03* *Aug. 23* | Month Day | Y. M. D. | Age *35-* | Native of *St. Marys* | Occupation *Housewife*
~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~
 Female *Colored* *Single* *Widower* | Number of children living *Don't know*

Husband of *Douglas Seale*
 Wife
 Father's Name *Thos. Jackson* | Mother's Maiden Name *Don't know*

Cause of Death { Primary *Consumption* | How long sick *2 1/2* years
 Immediate *Exhaustion* | Accident, Suicide, Homicide

Reported by *Jach. R. Morgan*

Address *Mechanicsville* *Maryland*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



George Stienen,

Town

County

Died at

St. Georges Island St. Marys

MARYLAND

Date 1903.

Month

Day

Y.

M.

D.

Native of

Occupation

Aug. 7

Age

64

-

-

Va.

Tobacco Dealer

Male

White

Married

Widow

~~Divorced~~~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

None

Husband

of

Miss Linn

~~Wife~~~~Partner's~~~~Name~~

Mother's

Maiden Name

Cause of

Primary

Heart Disease 79

Death

Immediate

How long sick

3 days

~~Accident, Suicide, Homicide~~

Reported by

T. Horace Smith, M.D.

Address

Valley Lee, St. Marys Co., Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

Thomas C. Ward

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at		Charlotte ^{Town} Hall		St. Mary's ^{County}		MARYLAND	
Date of death 1903	Month Aug	Day 11	Years Age 109	Months	Days		
Sex	Color or Race: White			Birth- place Ind			
Married, Single or Widowed	Widowed			Occupation Farmer			
Name of Wife or Husband				Phebe Langley			
Father's Name				93			
Mother's Maiden Name				Father's Birthplace			
Name of person giving In formation				Mother's Birthplace			
Sydney Dent				How related to deceased None			

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Extreme old age	How long	
Immediate	Pneumonia	How long	10 days
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician	
Yes		H. C. Chappell M.D.	
		Address	
		Hughesville Ind.	
Accident or Suicide?			



Name in Full

Certificate of Death

Richard Woodburn

Town

Clements

County

St Marys

MARYLAND

Died at

Date 1903
19

Month

Aug.

Day

12

Y.

Age 74

M.

D.

Native of

Md

Occupation

Farmer

Male

White

Married

~~Widow~~

Divorced

Number of children living

9

~~Female~~~~Colored~~

Single

Widower

Husband
of

Wife

Father's

Mother's

Name

Maiden Name

Cause of

Primary

Cancer of Stomach

How long sick

about 10 mo.

Death

Immediate

Accident, Suicide, Homicide

Reported by

R. B. Jensen

Address

Morgantown

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

